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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box: Patent Application
Washington, DC 20231

Attorney Docket No.	P56525RE
First Named Inventor	KI-OOK PARK <i>et alii.</i>
Original Patent Number	5,917,679
Original Patent Issue Date (Month/Day/Year)	June 29, 1999
Express Mail Label No.	

1. APPLICATION FOR REISSUE OF: (check applicable box) Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)

2. Applicant claims small entity status. See 37 CFR 1.27.

3. Specification and Claims in double column copy of patent (amended, if appropriate)

4. Drawing(s) (proposed amendments, if appropriate)

5. Reissue Oath/Declaration (not executed)
(37 C.F.R. §1.175)(PTO/SB/51 or 52)

6. Original U.S. Patent currently assigned?
 Yes No
(If Yes, check applicable box(es))
 Written Consent of all Assignees (PTO/SB/53)
 -**combined in Declaration**

37 C.F.R. §3.73(b) Statement

Power of Attorney (PTO/SB/96)
 -**combined in Declaration**

7. Statement of status/support for all changes to the claims. See 37 CFR 1.173(c). -**combined in Declaration**

8. Original U.S. patent for surrender
 Ribboned Original Patent Grant
 Statement of Loss (PTO/SB/55)
 -**combined in Declaration**

9. Foreign Priority Claim (35 U.S.C. 119) (If applicable)

10. Information Disclosure Statement (IDS) PTO-1449
 Copies of IDS Citations

11. English Translation of Reissue Oath/Declaration
(If applicable)

12. Preliminary Amendment

13. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

14. Other: _____

15. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. Or Attach bar code label here)	008-439		or <input checked="" type="checkbox"/> Correspondence address below		
Name	ROBERT E. BUSHNELL and Law Firm				
Address	1522 K Street, N.W., Suite 300				
City	Washington	State	D.C.	Zip Code	20005-1202
Country	U.S.A.	Telephone	(202) 408-9040	Fax	(202) 289-7100

NAME (Print/Type)	Robert E. Bushnell	Registration No. (Attorney Agent)	27,774
Signature			Date
			28 June 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent & Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

P56525RE

Claims as Filed - Part 1

Claims in Patent	For	Number filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee		Rate
(A) 20	Total Claims (37 CFR 1.16(j))	(B) 51	**** 51 - 20 = 31	×\$ ____ =		or	×\$ <u>18.00</u> = <u>\$558.00</u>
(C) 2	Independent Claims (37 CFR 1.16 (i))	(D) 5	* 5 - 3 = 2	×\$ ____ =			×\$ <u>80.00</u> = <u>\$16000</u>
Basic Fee (37 CFR 1.16(h))				\$ _____		\$ <u>710.00</u>	
Total Filing Fee				\$ _____		\$ <u>1,428.00</u>	

Claims as Filed - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee		Rate
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	×\$ ____ =		or	×\$ ____ =
Independent (37 CFR 1.16(i))	***	MINUS	*****	0	×\$ ____ =			×\$ ____ =
Total Additional Fee				\$ _____		OR \$ _____		

* If the entity in (D) is less than the entity in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

 Applicant claims small entity status. See 37 CFR 1.27. Please charge Deposit Account No. _____ In the amount of _____. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. _____. A duplicate copy of this sheet is enclosed. The amount of \$ 1,428.00 will be paid later upon filing of an executed Declaration. Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

28 June 2001

Date



Signature of Applicant, Attorney or Agent of Record

Robert E. Bushnell

Typed or printed name

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: KI-OOK PARK *et al.*

Original Patent No. 5,917,679 issued on 29 June 1999

Serial No.: *to be assigned*

Examiner: *to be assigned*

Filed: 28 June 2001

Art Unit: *to be assigned*

For: PSEUDO CONTACT TYPE NEGATIVE PRESSURE AIR BEARING SLIDER

REQUEST FOR APPROVAL OF DRAWING CHANGE(S)

Assistant Commissioner
for Patents
Washington, D.C. 20231

Box: REISSUE

Sir:

Approval of the drawing changes to patented Figs. 4, 5, 6(a), 6(b), 7, 10, and 11 as shown in red in the accompanying drawings in the above-captioned reissue application is respectfully requested.

Respectfully submitted,



Robert E. Bushnell
Attorney for Applicant
Reg. No.: 27,774

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Washington, D.C. 20005
Area Code: 202-408-9040

Folio: P56525RE
Date: 28 June 2001
I.D.: REB/kf

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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TRANSMITTAL OF DECLARATIONS

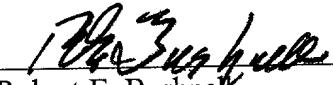
Assistant Commissioner
for Patents
Washington, D.C. 20231

Box: REISSUE

Sir:

This transmittal accompanies the unsigned Declaration and Power of Attorney for Reissue Application by Inventors and Assignee wherein Declaration as to Loss of Letters Patent is incorporated for the above-captioned reissue application. An executed Declaration will be submitted to the U.S. Patent & Trademark Office upon receipt of a serial number for the above-captioned application.

Respectfully submitted,


Robert E. Bushnell,
Attorney for the Applicant
Registration No.: 27,774

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